

# Maryland

## Families Served Through Evidence-Based Home Visiting in 2020

Models implemented in Maryland included Attachment and Biobehavioral Catch-Up, Early Head Start Home-Based Option, Family Connects, Family Spirit, Healthy Families America, Home Instruction for Parents of Preschool Youngsters, Nurse-Family Partnership, and Parents as Teachers. Statewide, 46 local agencies operated at least one of these models.



**23,753**

home visits provided  
*including 10,029 virtual visits*



**1,882**

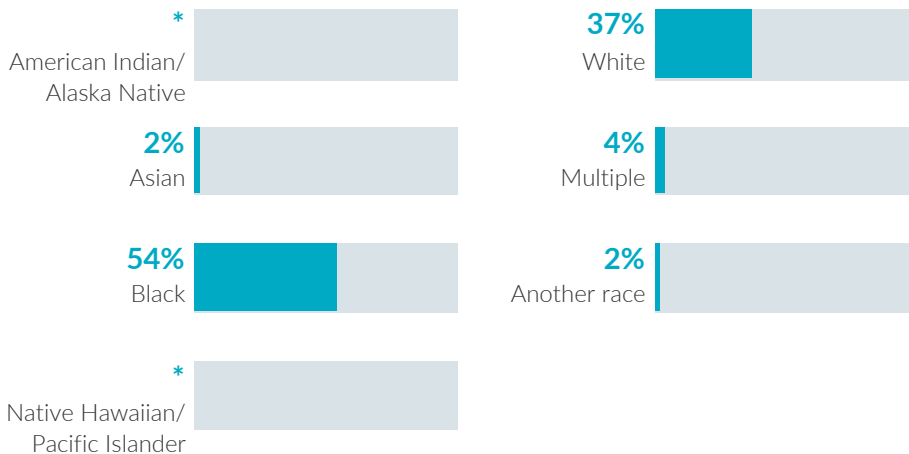
families served



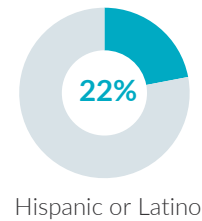
**2,544**

children served

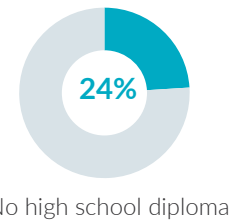
### Race



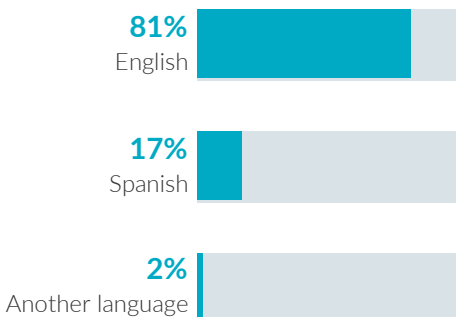
### Ethnicity



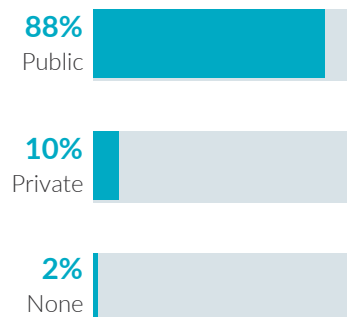
### Caregiver education



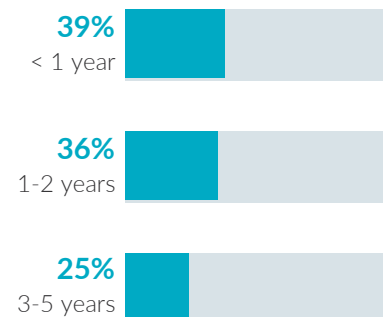
### Primary language



### Child insurance status



### Child age



# Maryland

## Potential Beneficiaries in 2020

In Maryland, there were 329,400 pregnant women and families with children under 6 years old not yet in kindergarten who could benefit from home visiting. These families included 424,200 children.

**424,200**  
**children**

could benefit from home visiting

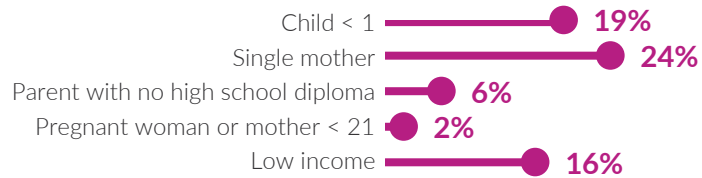
### Of the 424,200 children who could benefit—

Infants < 1 year	Toddlers 1-2 years	Preschoolers 3-5 years
<b>67,100</b> <b>16%</b>	<b>143,200</b> <b>34%</b>	<b>213,900</b> <b>50%</b>

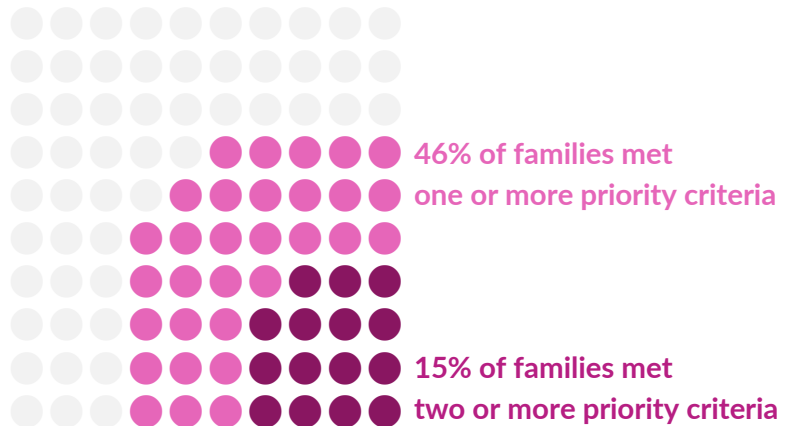
**329,400**  
**families**

could benefit from home visiting

Many home visiting services are geared toward particular subpopulations. The NHVRC estimated the percentage of families who could benefit in Maryland who met the following priority criteria:



### Of the 329,400 families who could benefit—



NHVRC State Profiles present data provided by evidence-based models, which include both MIECHV and non-MIECHV data. This State Profile includes participant data from the following evidence-based models: ABC, EHS, Family Connects, HFA, HIPPO, NFP, and PAT. • Missing and unknown data were not included in calculations. • Percentages may not add to 100 due to rounding. • To protect confidentiality, race and ethnicity categories with 10 or fewer participants were replaced with \*. • Public insurance includes Medicaid, CHIP, and TRICARE. • Low income is defined as family income below the federal poverty threshold. • Single mothers include single, never married mothers or pregnant women. • ABC reported children served, families served, total home visits, and virtual home visits only. • EHS did not require reporting on 2020 data due to the COVID-19 pandemic. The number of children served in 2019 was included as a proxy for children and families served in 2020. • Family Connects did not report children served or primary language. The number of families served was included as a proxy for children served. • HFA reported primary language of caregivers. • HIPPO did not report virtual home visits. • NFP reported primary language of caregivers. • PAT data for child insurance status and primary language were not included.

The NHVRC is led by James Bell Associates in partnership with the Urban Institute. Support is provided by the Heising-Simons Foundation and the Robert Wood Johnson Foundation. The views expressed here do not necessarily reflect the views of the foundations. For details about the methodology, see the 2021 *Home Visiting Yearbook*.



National Home Visiting  
**Resource Center**  
www.nhvrc.org